

Part III—Activities and Operational Information

- 1 Are you the outgrowth of continuation of any form of predecessor(s)? Yes ☐ No ☒

If "Yes," state the name of each predecessor, the period during which it was in existence, and the reasons for its termination. Submit copies of all papers by which the transfer of assets, if any, was effected.

- 2 Are you now or do you plan to be connected in any way with any other organization? Yes ☐ No ☒

If "Yes," describe the organization and explain the relationship.

- 3 Describe in detail the specific purposes for which you were formed, the activities presently carried on, and those that will be carried on. If the organization is not fully operational, explain what stage of development its activities have reached, what further steps remain for the organization to become fully operational, and when they will take place. If a particular activity specifically identifies the services performed or to be performed by the organization, (Do not state the purposes of the organization in general terms or repeat the language of the organizational documents.) If you are engaged in any business or fundraising activity, describe in detail the nature and the scope of the activity. Attach copies of all agreements relating to the conduct of such business or fundraising activity. For each business activity engaged in, state how it relates to the purposes of your exempt purpose.

The organization has been in operation approximately one month. A checking account has been established in the organization's name in order to account for any dues, contributions and disbursements. The organization to date has received dues from members (attorneys, law graduates and students) and has held meetings to encourage the participation of new members.

The organization was formed to provide legal educational programs for the members of the association; to establish a charitable fund for the purpose of awarding scholarships to worthy hispanic students pursuing a law career; to provide advisory assistance to members of the organization in the practice of the legal profession and to generally promote the business interest and professional condition of hispanic attorneys.

Part III.—Activities and Operational Information (Continued)

- 9** Does, or will, any part of your receipts represent payment for services rendered or to be rendered? Yes ☐ No ☒
 If "Yes," state in detail the amount received and the character of the services rendered or to be rendered.

- 10** Have you made, or do you plan to make, any payments to members of shareholders for services rendered or to be rendered? Yes ☐ No ☒
 If "Yes," state in detail the amount paid, the character of the services, and to whom the payments have been, or will be, made.

- 11** State the purpose(s), other than payment for services rendered or supplies furnished, for which your funds are, or will be, expended.

See Page 2, Part III.

- 12** Does, or will, any part of your net income inure to the benefit of any private shareholder or individual? Yes ☐ No ☒
 If "Yes," explain in detail.

- 13** Do you have any arrangement to provide insurance for members, their dependents or others (including provisions for the payment of sick or death benefits and pensions and annuities)? Yes ☐ No ☒
 If "Yes," please describe and explain the arrangement's rules of eligibility.

- 14** Are you under the supervisory jurisdiction of any public regulatory body, such as, Bureau of Western Energy, Board of Regents, etc.? Yes ☐ No ☒
 If "Yes," submit copies of all administrative decisions or court decisions regarding this supervisory jurisdiction as copies of applications or requests for the purposes of disclosure.

- 15** Are you now or do you plan to rent any property, whether as lessee or lessor in which you own an interest? Yes ☐ No ☒
 If "Yes," explain in detail, including the amount of rent, description of property and any restrictions on your organization to the other party. Also, attach a copy of any rental or lease agreement.

- 16** Have you spent or do you plan to spend any money attempting to influence the selection, nomination or appointment of any person to any Federal, State or local public office or to hold office in a political organization? Yes ☐ No ☒
 If "Yes," explain in detail and list the amounts spent or to be spent in each case.

Part IV—Financial Data (See Instructions)

Note: Complete a statement for the current year and for each of the three years immediately before it. If in existence less than four years, complete a statement for each year in existence.

Statement of Revenue and Expenses, for period ending **November 30, 1980**

(If you prepare a statement of revenue and expenses which is more descriptive and detailed than the statement below, you may submit that statement in place of this one.)

Revenue		
1	Gross dues and assessments of members	240.00
2	Gross contributions, gifts, etc.	160.00
3	Gross amounts derived from activity related to organization's exempt purpose (attach schedule)	0
	Minus cost of sales (attach schedule)	0
4	Gross amounts from unrelated business activities (attach schedule)	0
	Minus cost of sales (attach schedule)	0
5	Gross amount received from sale of assets, excluding inventory items (attach schedule)	0
	Minus cost or other basis and sales expense of assets sold (attach schedule)	0
6	Interest, dividends, rents and royalties	0
7	Other revenue (attach schedule)	0
8	Total revenue	400.00
Expense		
9	Contributions, gifts, grants and other amounts out (attach schedule)	0
10	Disbursements to or for the benefit of members (attach schedule)	0
11	Compensation of officers, directors, and trustees (attach schedule)	0
12	Other salaries and wages	0
13	Interest	0
14	Rent	0
15	Depreciation and depletion	0
16	Other expenses (attach schedule)	120.00
17	Total expenses	120.00
18	Excess of revenue over expenses (line 8 minus line 17)	280.00
Balance Sheets		Ending date 10/30/80
Assets		
19	Cash (a) interest-bearing accounts	None
	(b) Other	None
20	Accounts receivable, net	None
21	Inventories	None
22	Bonds and notes (attach schedule)	None
23	Corporate stocks (attach schedule)	None
24	Mortgage loans (attach schedule)	None
25	Other investments (attach schedule)	None
26	Depreciable and depletable assets (attach schedule)	None
27	Land	None
28	Other assets (attach schedule)	None
29	Total assets	None
Liabilities		
30	Accounts payable	None
31	Contributions, gifts, grants, etc., payable	None
32	Mortgages and notes payable (attach schedule)	None
33	Other liabilities (attach schedule)	None
34	Total liabilities	None
Fund Balance or Net Worth		
35	Total fund balance or net worth	280.00
36	Total liabilities and fund balance or net worth (line 34 plus line 35)	280.00

Has there been any substantial change in any aspect of your financial activities since the period ended, as shown above?

If "Yes," attach a detailed explanation.

() Yes (X) No

Schedule A Organizations described in section 501(c)(2) (Title holding corporations)

- 1 State below the complete name and address of each organization for which title to property is held and the number and class(es) of shares of your stock held by the organization.

Not applicable, hereinafter N/A

- 2 If within the past five years a stock interest in your organization has been held by persons other than organizations listed in 1 above, list below the names and addresses of these persons. Also, show the number and class(es) of shares of stock held by each person, the years held, the dividends payable in each year and the dates paid.

N/A

- 3 State whether the net annual income is or will be turned over to the organization for which title to property is held and if not, the purpose for which the income is or will be held.

N/A

- 4 State the promoter(s) of each organization for which title to property is held as shown in its governing instrument and the Code section(s) under which each organization is exempt from federal income tax.

N/A

Schedule B Organizations described in section 501(c)(4) (Civic leagues, social welfare organizations (including clubs, councils, etc., of veterans' organizations not qualifying or applying for exemption under section 501(c)(19), Schedule A, page 12) or local associations of employees.)

- 1 Have you engaged in or do you plan to engage in any activities on behalf of or in opposition to any individual or for public office? Yes ☐ No ☒
If "Yes," describe in detail the nature and extent of the activities.

N/A

- 2 Has the Service previously denied a ruling or letter ruling to you or to any party by whom you are organized listed in item 1 or last 10 to be exempt under section 501(c)(4) and later revoked that ruling or letter ruling exemption on the basis that you or your predecessor were carrying on propaganda or otherwise attempting to influence legislation? Yes ☐ No ☒
If "Yes," indicate the earliest taxable year for which revocation of exemption under section 501(c)(4) was revoked.

N/A

- 3 Do you perform or do you plan to perform (for members or the public) substantial services or activities in maintaining the common areas of a condominium, including the provision of such services as janitorial, recreational facilities or transportation services, or provision of other services to the public? Yes ☐ No ☒
If "Yes," explain the activities in detail, including income received and expenses incurred, and explain in detail the nature of the benefits to the general public from the activities. (If the answer to this question is explained in Part III (pages 2, 3, and 4), enter the page and line number here.)

N/A

ATTACHMENT - PAGE 5

16. Other Expenses:

\$140.00	Refreshments
80.00	Sandwiches
55.00	Incorporation Expense
6.82	Paper goods
22.00	Post Office Box
16.20	Stamps
<u>\$320.02</u>	Total Expenses

33. Other Liabilities:

\$ 80.00	Sandwiches
55.00	Incorporation Expense
6.82	Paper goods
22.00	Post Office Box
16.20	Stamps
<u>\$180.02</u>	Total Remaining Liabilities

- [illegible]

NA

Schedule C Organizations described in sections 501(c)(9) labor, agricultural, including fishermen's organizations, or horticultural organizations and 501(c)(14) (Business leagues, chambers of commerce, etc.)

1. 在下列各题中，选择正确的答案，将序号填入括号内。

See Part III, Page 2.

2. Financial Information - Copies of any financial statement, including balance sheet, income statement, and statement of cash flows, for the last three years, shall be provided to the interested parties.
3. Fishermen's Organizations only - What kind of support has been provided to the fishermen's organizations in the last three years? What kind of support has been provided to the fishermen's organizations in the last three years? What kind of support has been provided to the fishermen's organizations in the last three years?

N/A

- Interest organizations only - if you are representing another organization, you must be a member of that organization

Schedule D Organizations described in section 501(c)(2) (Social clubs)

- Have you entered in the plan to bring into any contract or agreement for the transportation of your property and/or with them, such as rent, freight, plus slope, Indian, etc. ☐ Yes ☒ No
- If "Yes," Attach a copy of the contract or agreement. If one has not yet been drawn up, please explain the details.

N/A

2. Do you seek or wish to work in the public sector (e.g. public library, school, hospital, government or other)?
- Yes ☒ No ☐
3. Yes, attach some copies of the below letters, as if the respondents had been asked to give you a letter from their employer.

N/A

Organization Described in section 501(c)(13) (Cemeteries, crematoriums and like corporations)

1. Are you following any of the following practices?
- (a) ☐ Yes ☐ No ☐ Sometimes
(b) ☐ Yes ☐ No ☐ Sometimes
(c) ☐ Yes ☐ No ☐ Sometimes
(d) ☐ Yes ☐ No ☐ Sometimes
(e) ☐ Yes ☐ No ☐ Sometimes
(f) ☐ Yes ☐ No ☐ Sometimes
(g) ☐ Yes ☐ No ☐ Sometimes
(h) ☐ Yes ☐ No ☐ Sometimes
(i) ☐ Yes ☐ No ☐ Sometimes
(j) ☐ Yes ☐ No ☐ Sometimes
(k) ☐ Yes ☐ No ☐ Sometimes
(l) ☐ Yes ☐ No ☐ Sometimes
(m) ☐ Yes ☐ No ☐ Sometimes
(n) ☐ Yes ☐ No ☐ Sometimes
(o) ☐ Yes ☐ No ☐ Sometimes
(p) ☐ Yes ☐ No ☐ Sometimes
(q) ☐ Yes ☐ No ☐ Sometimes
(r) ☐ Yes ☐ No ☐ Sometimes
(s) ☐ Yes ☐ No ☐ Sometimes
(t) ☐ Yes ☐ No ☐ Sometimes
(u) ☐ Yes ☐ No ☐ Sometimes
(v) ☐ Yes ☐ No ☐ Sometimes
(w) ☐ Yes ☐ No ☐ Sometimes
(x) ☐ Yes ☐ No ☐ Sometimes
(y) ☐ Yes ☐ No ☐ Sometimes
(z) ☐ Yes ☐ No ☐ Sometimes
2. Do you have or do you plan to have a perpetual care fund?
- If "Yes" attach a copy of the fund agreement and explain below the nature of such fund (cash, securities, bonds, etc.).
- Yes ☐ No ☐ Sometimes ☐

N/A

- 3 If you are claiming exemption as a peripheral care fund for an organisation described in section 5(1)(c), has the cemetery or organization for which funds are held established exemption under that section? ☐ Yes ☐ No
If "No," please explain _____

N/A

Schedule I Organizations described in section 501(c)(15) (Mutual insurance companies or associations other than life or marine)

- 1 Are all of the policies held by voting members? 100

N/A

2. Do individuals other than policyholders have voting rights? **N/A**
If "Yes," state the number of eligible individuals, their name and extent of their voting rights.

14/8

- Do pretestifiers have the right to the return of property lost or the loss of things in the process of being lost?
 If "No," please explain.
- | | Yes | No |
|--|-----|----|
| | | |

N/A

4. Please attach a sample copy of each type of policy issued.

Part IV (Continued)

Are nonmembers other than guests of members permitted or will they be permitted to use the club facilities or participate in or attend any functions or activities conducted by the organization? ☐ Yes ☐ No
 If "Yes," describe the functions or activities in which there has been or will be a nonmember participation or advantage. (Submit a copy of your house rules, if any.)

N/A

- (b) State the amount of nonmember income included in lines 3 and 4 of Part IV, page 8.
- (c) For taxable years beginning after October 20, 1976, enter the percent of gross receipts from nonmembers for the use of club facilities.
- (d) For taxable years beginning after October 20, 1976, enter the percent of gross receipts received from investment income and nonmember use of the club's facilities.

Gross Receipts. For the purposes of this part of question 3, included are income other than initiation fees, dues, rent to capital and products received from nonmember transactions, such as from the sale of club owned real estate.

(a) Is there contained in your charter, by laws, or other governing instrument, or in any written policy statement of your organization, any provision which provides for discrimination against any person on the basis of race, color, or religion? ☐ Yes ☐ No

(b) If "Yes," state whether or not this provision will be kept.

N/A

(c) If you have such a provision which will be repealed, deleted, or otherwise stricken from your requirements, state when this will be done.

(d) If you formerly had such a requirement and it no longer applies, give the date on which it became inapplicable.

Schedule E Organizations described in sections 501(c)(8) or 501(a)(10) (Fraternal societies, orders, or associations)

1 Are you a college fraternity or sorority or chapter of a college fraternity or sorority? ☐ Yes ☐ No

If "Yes," read the instructions for Schedule E before completing any more of this Schedule.

2 Does (or will) your organization operate under the lodge system? ☐ Yes ☐ No

If "No," does (or will) it operate for the exclusive benefit of the members of an organization operating under the lodge system? ☐ Yes ☐ No

3 In the case of a subordinate or local lodge, etc., Attach a certificate signed by the secretary of the parent organization for the seal of the organization, certifying that the subordinate lodge is duly constituted body operating under the jurisdiction of the parent body.

4 In the case of a parent or grand lodge, attach a schedule for each subordinate lodge in active operation reflecting (a) its name and address, (b) the number of members in it, and (c) how often it holds periodic meetings.

N/A

Schedule F Organizations described in section 501(c)(9) (Voluntary employees' beneficiary associations)

1 Describe below the benefits available to members.

N/A

0129 000

Schedule F (Continued)

- 2 Are any employees or classes of employees entitled to benefits to which other employees or classes of employees are not entitled?

If "Yes," explain:

Yes ☐ No ☒

N/A

- 3 State the total number of persons entitled to receive benefits (do not include dependents of employees)

N/A

- 4 State the number of persons, if any, other than employees and their dependents (e.g., beneficiaries of self-employed persons) who are entitled to receive benefits.

N/A

- 5 Attach sample copies of all types or classes of policies or certificates of membership issued or to be issued.

Schedule G Organizations described in section 501(c)(12) (Benevolent life insurance associations, mutual ditch or irrigation companies, mutual or cooperative telephone companies, or like organizations)

- 1 For each annual accounting period that you are claiming exemption attach a schedule listing:

N/A

- (a) The total amount of gross income received from members or shareholders

- (b) The total amount of gross income received from other sources (Do not net amounts due to or paid for by members or shareholders due from or received from them.)

- (c) Cooperative telephone companies only. The total gross amounts of income received from members for telephone service for prior and current years which involve your membership for each taxable year beginning with the calendar year 1971.

- 2 If you are claiming exemption as a benevolent life insurance association, indicate:

- (a) The copies of the articles of association accepted or will be accepted

N/A

- (b) Whether stipulated premiums are or will be charged in advance or whether losses are or will be shared among the associates

N/A

- 3 If you are claiming exemption as a mutual or cooperative telephone company, you must attach:

N/A

- 4 If you are a cooperative telephone company and have contracts with members for telephone service, attach copies of the contracts.

N/A

- 5 Are the rights and interest of members in your annual savings determined by reference to their savings with you?

N/A

Yes ☐ No ☒

- If "Yes," do you keep the records necessary to determine at any time each member's rights and interest in such savings, including amounts required with the savings?

N/A

Yes ☐ No ☒

- 6 Attach sample copies of all types of membership certificates or forms of policies issued or to be issued.

Schedule J

Organizations described in section 501(c)(17) (Trusts providing for the payment of supplemental unemployment compensation benefits)

- 1 Are benefits provided for individual proprietors, partners, or self-employed persons under the plan? Yes ☐ No ☐
- If "Yes," explain in detail below:

N/A

- 2 Does the plan provide other benefits in addition to the supplemental unemployment compensation benefits? If "Yes," explain in detail below, and state whether the other benefits are subordinate to the unemployment benefits. Yes ☐ No ☐

N/A

- 3 Were any of the transactions listed below entered into by any of the following: the creator of your organization (if it is a trust); a contributor to your organization; a brother or sister (whole or half blood); a spouse; an ancestor; a descendant; or a son or daughter; a creditor or contributor; or a corporation controlled directly or indirectly by such a creator or contributor? N/A

None. If you know or are considering that you will be a party to any of the transactions (or individuals listed below, check "Planned" box. If any answer is "Yes," or "Planned," please explain in detail below.

- | | | | | |
|--|-----|------------------------------|-----------------------------|----------------------------------|
| (a) Borrow any part of your income or corpus? | N/A | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Planned <input type="checkbox"/> |
| (b) Receive any compensation for personal services? | N/A | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Planned <input type="checkbox"/> |
| (c) Obtain any part of your services? | N/A | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Planned <input type="checkbox"/> |
| (d) Purchase any securities or other properties from your | N/A | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Planned <input type="checkbox"/> |
| (e) Sell any securities or other property to your | N/A | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Planned <input type="checkbox"/> |
| (f) Receive any of your income or corpus in any other transaction? | N/A | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Planned <input type="checkbox"/> |



Schedule L Qualified Group Legal Services Plans (Section 120)

- 1 (a) Name of plan **N/A**
 (b) Plan number (see instructions) **N/A**
 (c) Plan year ends (Date) **N/A**
- 2 A qualification determination or ruling is requested for:
 (a) ☐ Initial qualification of a plan adopted **N/A**
 (b) ☐ Amendment of a plan adopted **N/A**

If you check (a), please submit a copy of the documents establishing the plan, including a copy of the plan and any related trust instrument. If the plan was subject to collective bargaining, include a copy of the collective bargaining agreement pertaining to it. If you check (b), submit a copy of the amendment.

Note: Once a plan has qualified you need not file a new Form 1024 with each of the subsequent years. The Service is to be notified of any subsequent amendments.

- 3 Describe the legal services covered by this plan, if they are not described in the schedule to the last bargaining agreement.

N/A

- 4 Please give the following information (as of the first day of the first plan year for which you are filing this application): enter if at date here (Give date)

- (a) Total number of employees covered by the plan, including shareholders, officers, directors and persons, or highly compensated **N/A**
 (b) Number of other employees covered by the plan **N/A**
 (c) Number of employees not covered by the plan **N/A**
 (d) Total number employed **N/A**

Should equal the total of (a), (b), and (c). If not, explain. Describe the eligibility requirements that prevent those employees not covered by the plan from participating.

- 5 Are all eligible employees entitled to the same benefits? ☐ Yes ☐ No

If not, explain the differences.

N/A

- 6 Manner of funding the plan:

- (a) ☐ Payments to insurance companies **N/A**
 (b) ☐ Payments to organizations described in section 501(c)(20)
 (c) ☐ Payments to organizations described in section 501(c)(3), which are to pay or credit your payments to other organizations described in section 501(c)(20)
 (d) ☐ Prepayments to providers of legal services
 (e) ☐ Any combination of the above (Show above by letter)

Schedule M Trust or organization set up under section 501(c)(20)

- 1 (a) Was this trust or organization created or organized in the United States? **N/A** ☐ Yes ☐ No
 (b) If so, was it created or organized to form part of a group legal services plan or plans qualified under section 120? **N/A** ☐ Yes ☐ No
 If "Yes," enter plan name: _____
 (c) If (b) is "Yes," has this plan (or plans) qualified under section 120? **N/A** ☐ Yes ☐ No
 (d) If (c) is "Yes," please attach a copy of a ruling or determination letter(s). If "No," attach explanation.

- 2 If the trust or organization provides legal services or indemnification against the cost of legal services unassociated with a qualified group legal services plan, describe the nature and extent of those services.

N/A

- 3 Please attach copies of all organizational documents.

Part III. Activities and Operational Information (Continued)

4 List below the names and addresses of the officers and directors of your organization as the current lists as of the year immediately before for the year the organization has existed of less than 1 year, and if more than 1 year, which each person held office.

Board of Directors:

1. Joseph H. Rodriguez, Esq., 518 Market St., Camden, N.J., 08101 - less than 1 year
2. E. Mathias Rodriguez, Esq., 436 Ambury Ave. Perth Amboy, N.J., 08861 - less than 1 year
3. Hector Guzman, Esq., 337 Park Ave., Paterson, N.J., 07509 - less than 1 year
4. Severiano Lisboa, Esq., Hudson County Legal Services, 628 Newark Ave., Jersey City, N.J., 07306 - less than 1 year
5. Grissale Camacho-Pagan, Esq., 175 Prospect St., #248, East Orange, N.J., 07017 - less than 1 year
6. Hector E. DeSoto, Esq., One Bloomfield Ave., Newark, N.J. 07104 - less than 1 year
7. Margarita Echevarria, Esq., The Mutual Benefit Life Insurance Co., 920 Broad St., Newark, N.J., 07101 - less than 1 year
8. Federico Velez, Esq., 168 Bloomfield Ave., Newark, N.J. 07104 - less than 1 year
9. Carmen Gonzalez-Bravman, 72 Douglas Dr., Townsco, N.J., 07092 - less than 1 year
10. Zaida J. Torres, Essex-Newark Legal Services, 18 Rector St., Newark, N.J. 07102 - less than 1 year

5 Do you have capital stock issued and outstanding?

Yes ☐ No ☒

If "Yes," state (1) class or classes of the stock, (2) number and par value of the shares, (3) capitalization for which they were issued, and (4) whether any dividends have been paid or whether your creating institution authorities dividend payments on any class of capital stock.

6 State the qualifications necessary for membership in the organization, the classes of membership, and the number of members in each class and the voting rights and privileges received. Also, if any person or class of persons is required to complete the requirement and explain the relationship between those persons and members of the organization. Submit copies of any membership solicitation material. War veterans' posts or organizations reporting under 501(c)(1) or (2) omit this item.

Active Membership - Member of Bar who practices/resides in N.J. rate of more - \$30
Associate Membership - Member of any Bar or member less than 6 - \$20
Law Graduate Membership - Law Student/Graduate - \$15

7 Explain how your assets will be distributed on dissolution. (If State statutes, court decisions, or binding instruments, etc., determine the manner of distribution, state this and identify the statute, court decision, etc.) War veterans' posts or organizations applying under section 501(c)(1) or (2) and completing Schedule K, Item 7, (b), omit this item.

See, paragraph no. 5, Certificate of Incorporation

8 Have you made or do you plan to make any distribution of your property or surplus to shareholders or members?

Yes ☐ No ☒

If "Yes," state the full details including (1) amounts or value, (2) source of funds or assets distributed, and (3) basis of and authority for distribution or planned distribution.